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APPLICANTS

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** CONTINUING DATA ***** NONE DS

** FOREIGN APPLICATIONS ***** NONE DS

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 02/04/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>	FL	7	36	4

ADDRESS

34952

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551 N.W. 77TH STREET, SUITE 111

BOCA RATON, FL

33487

TITLE

Remotely initiated low power mode

FILING FEE RECEIVED 1144	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input checked="" type="checkbox"/> All Fees <input checked="" type="checkbox"/> 1.16 Fees (Filing) <input checked="" type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input checked="" type="checkbox"/> 1.18 Fees (Issue) <input checked="" type="checkbox"/> Other _____ <input checked="" type="checkbox"/> Credit
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